Case Management

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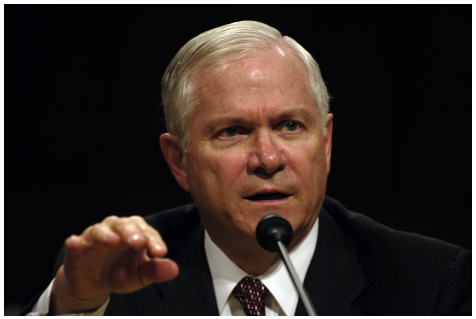
Agenda

- **Case Management (CM)**
  - MHS Wounded, Injured, and Ill (WI&I) Service Members and Their Family
    - *Background and linkages to external reviews*
    - *DoD Case Management Model*
    - *The Way Ahead*

A Top Priority

"…Our nation is truly blessed that so many talented and patriotic young people have stepped forward to serve. They deserve the very best facilities and care to recuperate from their injuries and ample assistance to navigate the next step in their lives, and that is what we intend to give them. ***Apart from the war itself, this department and I have no higher priority.****"*



- Secretary of Defense, 2 May 2007

MHS WII Service Members and Case Management

- **Background**
  - March 6, 2007: **"The President's Commission on Care for America's Returning Wounded Warriors"** appointed to conduct a comprehensive review of the services America is providing our returning wounded warriors
  - March 15, 2007: ASD(HA) tasked Office of the Chief Medical Officer to address **CM issues of OEF/OIF wounded, injured, or ill warfighters and MHS-level family support**
  - April 2007: **Independent Review Group Report on Rehabilitative Care and Administrative Processes at Walter Reed Army Medical Center and National Naval Medical Center** recommends..."define clear standards, qualifications, and training requirements for case managers."
  - April 2007: **Task Force on Returning Global War on Terror Heroes Report to the President** recommends..."develop a system of co-management and case management"
  - May 2007: **Senior Oversight Council Line of Action for DoD/VA CM Reform** Goal: Facilitate and guide Service members and their families (caring community) through the process

Plenty of Help

Pending Legislation Defined

- **HR 1538: Improve the management of care & services for members of the Armed Forces in outpatient status and for other purposes (“Wounded Warrior Assistance Act of 2007”)**
- **HR 1268: Ensure dignity in care for members of the Armed Forces recovering from injuries. (“Dignity for Wounded Warriors Act of 2007”)**
- **HR 1577: Create a DoD-wide program of patient navigators for wounded members of the Armed Forces. (“Wounded Warriors Joint Health Care Patient Navigators Act”)**
- **HR 1578: Establish and monitor medical holdover performance standards (“Wounded Warriors Joint Health Care Performance Metrics and Transparency Act”)**
- **HR 1580: Create a Department of Defense-wide Ombudsman Office (“Wounded Warriors Joint Health Care Ombudsman Act”)**
- **S. 713: Ensure dignity in care for members of the Armed Forces recovering from injuries. (“Dignity for Wounded Warriors Act of 2007”)**
- **S.1044: Improve the medical care of members of the Armed Forces and veterans, and for other purposes**
- **S. 1113: Facilitate the provision of care and services for members of the Armed Forces for traumatic brain injury, and for other purposes (“Traumatic Brain Injury Access to Options Act”)**

MHS WII Service Members and Case Management (CM)

- **Status**
  - Established key CM points of contact from Army, Air Force, and Navy; three TRICARE Regional Offices (TROs); Veterans Affairs (VA); OSD Personnel and Readiness; TMA Force Health Protection & Readiness and Information Management, Technology, & Reengineering
  - DoD/VA Seamless Transition Clinical Case Management (CM) Work Group Charter was signed on May 10, 2007
    - *Reports to the Health Executive Council (HEC)*
  - Hosted MHS Case Management Summit, May 15-16, 2007
    - Information Management
    - Training and Competencies
    - Policy

Day 2 Work Groups

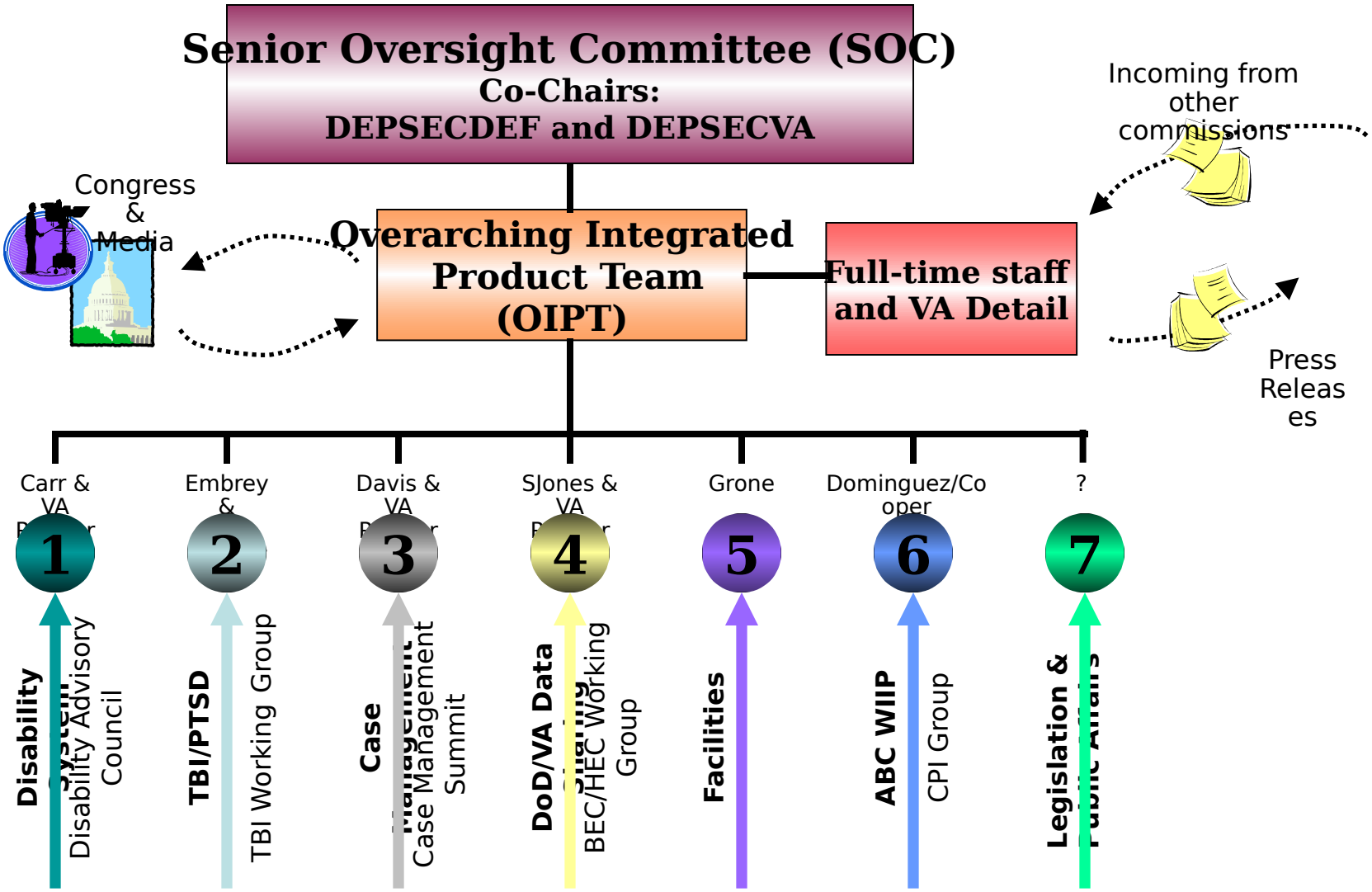
MHS WII Service Members and Case Management

- **Status (con't)**
  - Meet regularly with Senior Oversight Council Line of Action for DoD/VA CM Reform
    - Led by: Dr. Lynda Davis (Deputy Assistant Secretary of the Navy for Military Personnel Policy) and Ms. Kristin Day (Acting National Director, Social Work Service for the VA)
    - Purpose: Standardize clinical **and non-clinical** case management processes to facilitate and guide Service members and their families through the process
  - MCSC's weekly roster of all ADSMs in civilian inpatient facilities:

MCSC Active Duty Patients in CM as of 5 JUN 07

South	North	West	Totals
19	5	11	35

The Structure



DoD Case Management Model

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TRICARE Benefits

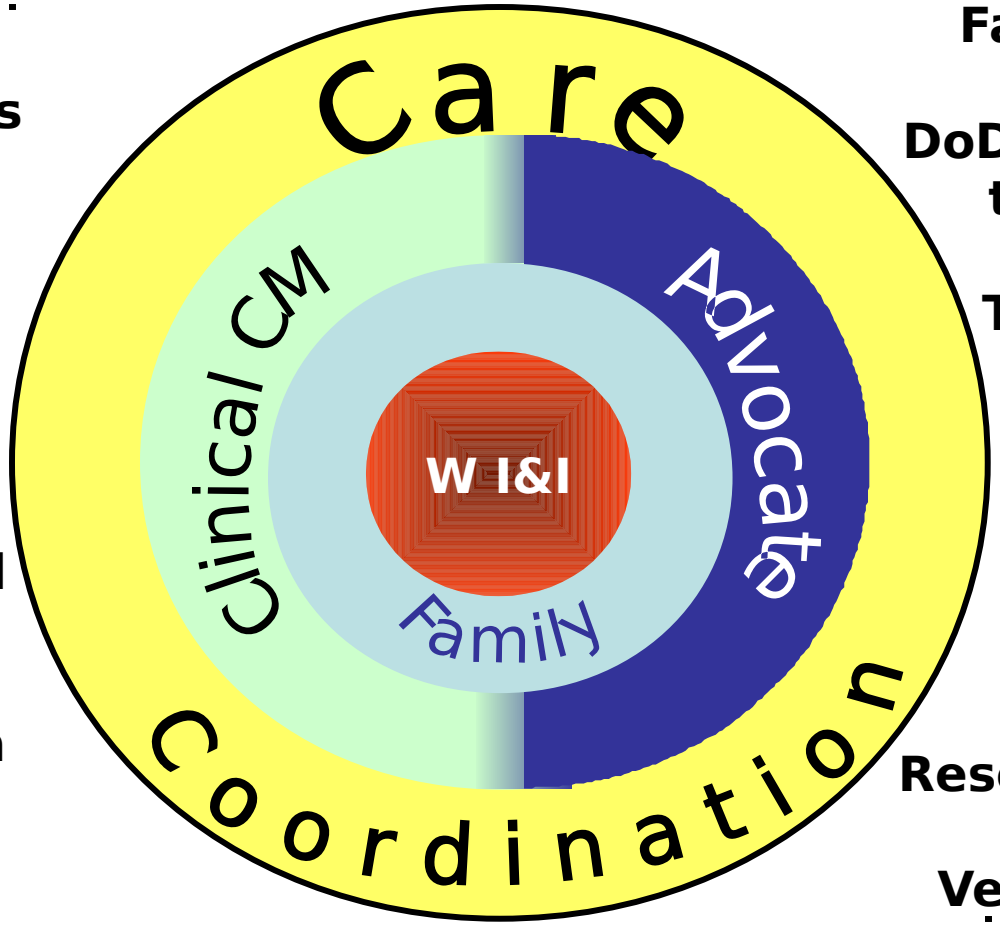
Medical Care

Specialty Care

Mental Health

Durable Medical Equipment

Veterans Health Administration



Family Support

DoD/Federal/NGO/State Benefits

Travel Orders

Pay

PCS

DES Process

Reserve Challenges

Veterans Benefit Administration

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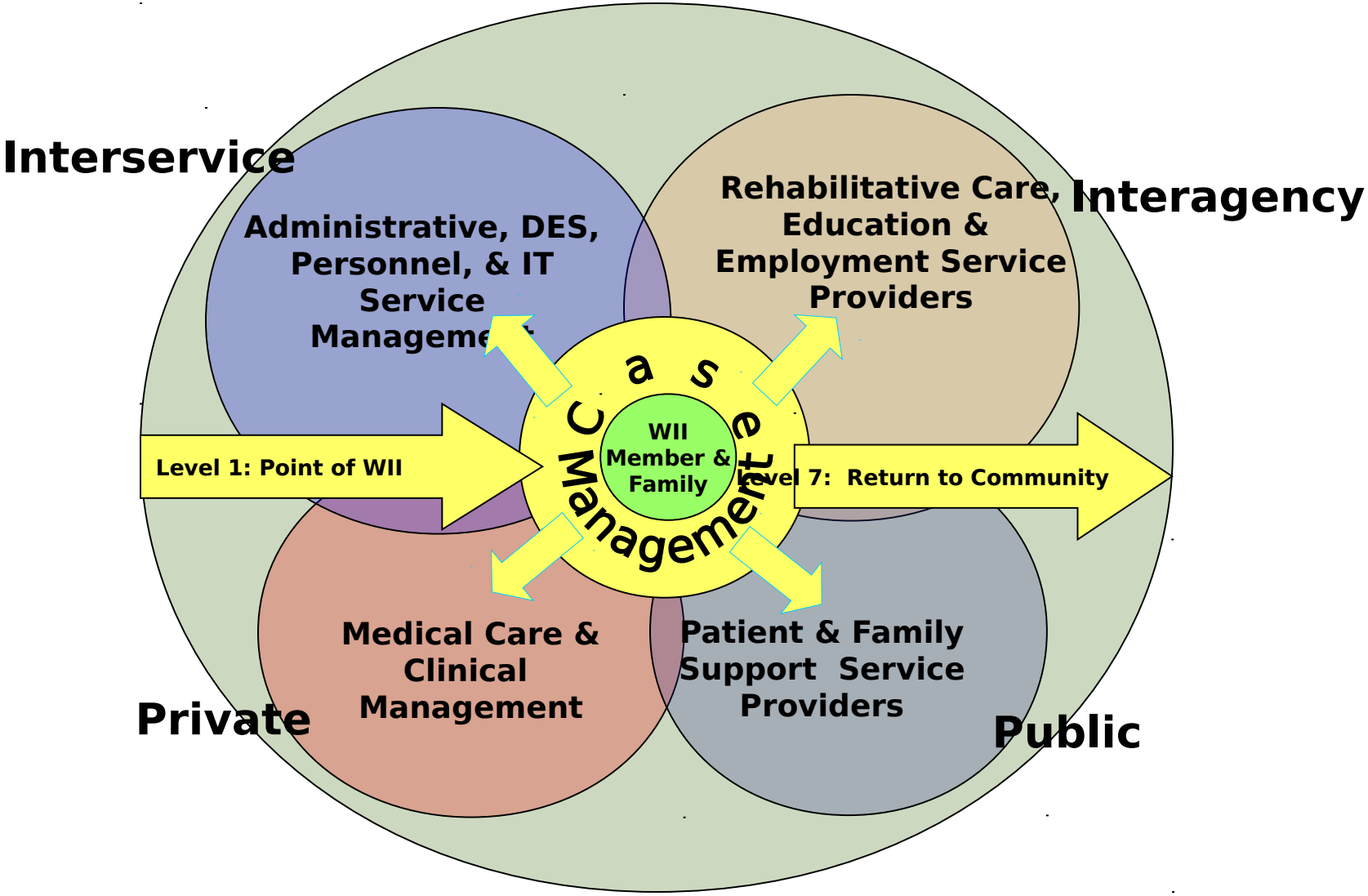
Framework for Integrated Continuum of Care for Wounded, Injured, Ill and Their Families (DRAFT)



MHS WII Service Members and Case Management

- **The Way Ahead…"Fix CM"**
  - Address and implement recommendations from the various task forces and review groups:
    - SOC Line of Action for CM Reform sub-group is meeting with TMA Integrated Requirements Design Team to derive functional requirements for a unified DoD/VA CM information system solution
    - DoD and VA education and training collaboration
    - DoD and VA collaborating on joint definition for clinical and "non-clinical" case manager
    - Make specified changes to the current DoDI 6025.20: "Medical Management (MM) Programs in the Direct Care System (DCS) and Remote Areas" and update the DoD Medical Management Guide. (Cited by the IRG as an important reference)

MHS WII Service Members and Case Management

- **The Way Ahead…"Fix CM" (con't)**
  - "Non-clinical" CM Summit planned for July 2007
  - Finalize DoD/VA CM model

MHS WII Service Members and Case Management

Questions…